

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
Title:: ACUTE TREATMENT OF HEADACHE WITH
PHENOTHIAZINE ANTIPSYCHOTICS
Attorney Docket Number:: 00064.01R
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity:: Yes
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Ron
Middle Name:: L.
Family Name:: HALE
City of Residence:: Woodside
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 17085 Skyline Boulevard
City of mailing address:: Woodside
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94062

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Peter
Middle Name:: M.
Family Name:: LLOYD
City of Residence:: Walnut Creek, CA
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 30 Carisa Court
City of mailing address:: Walnut Creek
State or Province of mailing address:: California
Postal or Zip Code of mailing address:: 94597

Given Name:: Amy
Middle Name:: T.
Family Name:: LU
City of Residence::
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 1090 Valley View Court
City of mailing address:: Los Altos
State or Province of mailing address:: California
Postal or Zip Code of mailing address:: 94024

Applicant Authority type:: Inventor
Primary Citizenship Country: CZ
Status:: Full Capacity
Given Name:: Patrik
Middle Name::
Family Name:: MUNZAR
City of Residence:: Belmont

State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 2417 Hastings Drive
City of mailing address:: Belmont
State or Province of mailing address:: California
Postal or Zip Code of mailing address:: 94002

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Roman
Middle Name::
Family Name:: SKOWRONSKI
City of Residence:: Palo Alto
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 4182 Cherry Oaks Place
City of mailing address:: Palo Alto
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94306

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Joshua
Middle Name:: D.
Family Name:: RABINOWITZ
City of Residence:: Mountain View
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 750 N. Shoreline Boulevard #98

City of mailing address:: Mountain View

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94043

Correspondence Information

Correspondence Customer Number:: 37485

Name:: Elaine C. Stracker

Name:: Alexza Molecular Delivery Corporation

Street of mailing address:: 1001 East Meadow Circle

City of mailing address:: Palo Alto

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94303

Phone number:: (650) 687-3905, (650) 687-3900

Fax Number:: (650) 687-3998

Representative Information

Representative Designation::	Registration number::	Name::
Primary	43,166	Elaine C. Stracker

Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This application	Claims priority to	60/429,404	11/26/2002

Assignee Information

Assignee name:: Alexza Molecular Delivery Corporation

Street of mailing Address:: 1001 East Meadow Circle

City of mailing address:: Palo Alto

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94303